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Jonathan E. Retzky
Name of applicant, assignee or
Registered Representative

JKR
Sept. 7, 2000
Signature

Date of Signature

Our Case No. 5847/14

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Arch D. Robison)
Serial No. 09/552,292)
Filing Date: 4/19/00)
For: Data-flow Method for Optimizing Exception-)
handling Instructions in Programs)
Group Art Unit: 2762

REQUEST FOR CORRECTION OF FILING RECEIPT

Assistant Commissioner for
Patents
Washington, D.C. 20231

Attention: Office of Initial Patent Examination's
Customer Service Center

Sir:

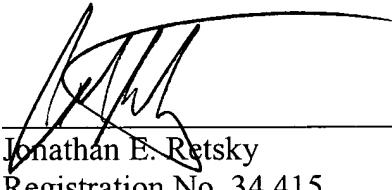
Applicants request the issuance of a corrected filing receipt (copy enclosed) for the above-identified application, and in support of this request respectfully state:

U.S. Serial No. 09/552,292
Filed: 4/19/00
Page Two of Two

The residence of the inventor has been omitted and should be inserted as follows, as evidenced by a copy of the declaration filed with this application. Please insert -- Champaign, IL --.

The Commissioner is hereby authorized to charge any fees required to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



Jonathan E. Retsky
Registration No. 34,415
Attorney for Applicants

Dated:
BRINKS HOFER GILSON & LIONE
P.O. Box 10395
Chicago, Illinois 60610
(312) 321-4200



CORRECTED FILING RECEIPT



OC00000005308740

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	END CLAIMS	RECEIVED
09/552,292	04/19/2000	2762	690	5847/14	25	9	20	SEP 20 2000

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Date Mailed: 08/09/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Arch D. Robison, Residence Not Provided;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 06/29/2000

Title

Data-flow method for optimizing exception-handling instructions in programs

Preliminary Class

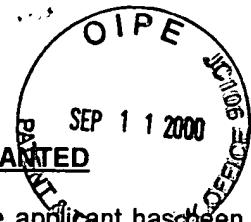
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Data entry by : JONES, KIMBERLY

Team : OIPE

Date: 08/09/2000





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Title 37, Code of Federal Regulations, 5.11 & 5.15

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Bib Data Sheet

SERIAL NUMBER 09/552,292	FILING DATE 04/19/2000 RULE	CLASS 717	GROUP ART UNIT 2762	ATTORNEY DOCKET NO. 5847/14
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APPLICANTS

Arch D. Robison, Champaign, IL ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 06/29/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	IL	25	9	3
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

Jonathan E Retsky
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Chicago ,IL 60610

TITLE

Data-flow method for optimizing exception-handling instructions in programs

FILING FEE RECEIVED 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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